

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>10/19/04</u>	2 Serial/Patent # <u>101 761 223</u>							
3 Please refund the following fee(s):								
Filing	4 PAPER NUMBER							
Amendment	5 DATE FILED							
Extension of Time	6 AMOUNT							
Notice of Appeal/Appeal	\$							
<u>✓</u> Petition	<u>1 Pw</u> <u>8/4/04</u> <u>\$130</u>							
Issue	\$							
Cert of Correction/Terminal Disc.	\$							
Maintenance	\$							
Assignment	\$							
Other	\$							
7 TOTAL AMOUNT OF REFUND <u>\$130</u>								
8 TO BE REFUNDED BY:								
10 REASON:	Treasury Check							
Overpayment	Credit Deposit A/C #:							
Duplicate Payment	<u>9</u> <table border="1"><tr><td>5</td><td>0</td><td>--</td><td>0</td><td>2</td><td>3</td><td>8</td></tr></table>	5	0	--	0	2	3	8
5	0	--	0	2	3	8		
<u>✓</u> No Fee Due (Explanation): <i>PTO Error</i>								
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: <u>ABrown</u>								
SIGNATURE: <u><i>[Signature]</i></u>	TITLE: <u>ATTY</u>							
OFFICE: <u>PTO</u>	PHONE: <u>23205</u>							
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****								
APPROVED: <u>Alice Kelly</u>	DATE: <u>10/26/04</u>							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B